PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

appropriate. All further indicated unless corrects	correspondence including a below or directed of	for trange the nerwise	smitting the ISSU Patent, advance on in Block 1, by (a	JE FEE and PUBLIC ders and notification of specifying a new co	of ma orresp	ON FEE (if requi aintenance fees w ondence address;	red). E vill be and/or	Blocks 1 through 5 sh mailed to the current of (b) indicating a separ	ould be completed where correspondence address as rate "FEE ADDRESS" for	
maintenance fee notificat	ions.				37 .		.,.			
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
20322 7590 08/04/2006										
CNIELL & WILLIAMED						Cer	tificate	of Mailing or Transn	nission deposited with the United	
SNELL & WILMER						I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile				
ONE ARIZONA CENTER						ssed to the Mail	Stop	ISSUE FEE address a	above, or being facsimile	
400 EAST VAN BUREN					transr	nitted to the USP	FO (57	1) 273-2885, on the da	te indicated below.	
PHOENIX, AZ 85004-2202					FILED VIA EFSWEB (Depositor's name				(Depositor's name)	
					TILD VIII I	(Signature)				
	<u> </u>	(Date)								
APPLICATION NO.	APPLICATION NO. FILING DATE			FIRST NAMED INVENT	R ATTORNEY DOCKET NO. CON			CONFIRMATION NO.		
10/708,830	Blayn W. Beenau 60655.9300 2829					2829				
10/708,830 03/26/2004 Blayn W. Beenau 60655.9300 2829 TITLE OF INVENTION: METHOD AND SYSTEM FOR DNA RECOGNITION BIOMETRICS ON A FOB										
INTEL OF BUT MANAGE, RELITED BUT OF DISTRICT ON DISTRICT DISTRICT OF THE OF										
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE		PUBLICATION FEE DUE		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO		\$1400	\$300		\$0		\$1700	11/06/2006	
EXAMINER			ART UNIT	CLASS-SUBCLASS	\neg					
FRECH, KARL D 2876			2876	235-487000						
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list										
CFR_1.363).	(I) the names of up to 3 registered patent attorneys Snell & Wilmer L.L.P									
Change of correspondence address (or Change of Correspondence				or agents OR, alternatively,						
Address form PTO/SB/122) attached.				(2) the name of a single firm (having as a member a 2						
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			ation form	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3						
Number is required.				listed, no name will be printed.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)										
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIG	(B) RESIDENCE: (CITY and STATE OR COUNTRY)									
AMERICAN EX	NEW YORK, NEW YORK									
RELATED SERVICES COMPANY, INC.										
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government										
4a. The following fec(s) are submitted: 4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)									hown above)	
🖾 Issue Fee				A check is enclosed.						
Publication Fee (No small entity discount permitted)				Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of Copies5				The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 192814 (enclose an extra copy of this form).						
				overpayment, to D)eposi	it Account Numbe	r_19	2814 (enclose an	extra copy of this form)	
5. Change in Entity Stat	· ·		•	П						
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. Ub. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).										
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patential Trademark Office.										
		//	// _							
Authorized Signature	1/1					Date Aug	ust	22, 2006		
	100	<i>O</i> .	7					20.020		
Typed or printed name			elman .			Registration N		39,038	L d HOPTO	
This collection of inform an application. Confident	ation is required by 37 (iality is governed by 35	FR 1.3 U.S.C	11. The information 122 and 37 CFR	on is required to obtain 1.14. This collection is	or ret	tain a benefit by the mated to take 12 r	ne publ ninutes	to complete, including	by the USPTO to process) gathering, preparing, and	

an application. Confidentially is governed by 35 U.S.C. 122 and 37 CPR 1.14. This concerns is estimated to be expected, including gathering, pipeling, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.